1	S.3
2	Senator Sears moves that Senate concur with the House proposal of
3	amendment with further amendment as follows:
4	First: By striking out Sec. 6, forensic care working group, in its entirety and
5	inserting in lieu thereof a new Sec. 6 to read as follows:
6	Sec. 6. REPORTS; FORENSIC CARE WORKING GROUP; PROSECUTOR
7	NOTIFICATION; COMPETENCY RESTORATION MODELS
8	(a) On or before July 15, 2021, the Department of Mental Health shall
9	convene a working groups of interested stakeholders to provide
10	recommendations necessary to carry out the provisions in subsections (b), and
11	(c), and (d) of this section, including as appropriate:
12	(1) a representative from the Department of Corrections;
13	(2) a representative from the Department of Disabilities, Aging, and
14	Independent Living;
15	(3) a representative from the Department of Buildings and General
16	Services;
17	(4) the Chief Superior Judge;
18	(5) a representative from the Department of State's Attorneys and
19	Sheriffs;
20	(6) a representative from the Office of the Attorney General;
21	(7) a representative from the Office of the Defender General;

1	(8) the Director of Health Care Reform or designee;
2	(9) a representative appointed by Vermont Care Partners;
3	(10) a representative appointed by Vermont Legal Aid's Mental Health
4	Project;
5	(11) a representative appointed by the Vermont Medical Society;
6	(12) three crime victims representatives, appointed by the Vermont
7	Center for Crime Victim Services;
8	(13) the Mental Health Care Ombudsman established pursuant to
9	18 V.S.A. § 7259 or designee;
10	(14) a representative of the designated hospitals, appointed by the
11	Vermont Association of Hospitals and Health Care Systems;
12	(15) three individuals with lived experience of mental illness, at least
13	one of whom has lived experience of the criminal justice system or the civil
14	commitment system, or both, appointed by Vermont Psychiatric Survivors;
15	(16) a representative appointed by the Vermont Developmental
16	Disabilities Council; and
17	(17) any other interested party permitted by the Commissioner of
18	Mental Health.
19	(b)(1) On or before August 1, 2022, the Department of Mental Health shall
20	submit a final report to the Joint Legislative Justice Oversight Committee and
21	the chairs of the House Committees on Corrections and Institutions, on Health

1	Care, and on Judiciary and to the Senate Committees on Health and Welfare
2	and on Judiciary addressing:
3	(A) any gaps in the current mental health and criminal justice system
4	structure related to individuals incompetent to stand trial or who are
5	adjudicated not guilty by reason of insanity;
6	(B) opportunities to:
7	(i) improve public safety and address the treatment needs for
8	individuals incompetent to stand trial or who are adjudicated not guilty by
9	reason of insanity; and
10	(ii) consider the importance of victims' rights in the forensic care
11	process;
12	(C) competency restoration models used in other states, including
13	both:
14	(i) models that do not rely on involuntary medication to restore
15	competency; and
16	(ii) how cases where competency is not restored are addressed;
17	(D) models used in other states to determine public safety risks and
18	the means used to address such risks, including guilty but mentally ill verdicts
19	in criminal cases;
20	(E)(D) due process requirements for defendants held without
21	adjudication of a crime and presumed innocent;

1	(F)(E) processes regarding other mental conditions affecting
2	competence or sanity, including intellectual disabilities, traumatic brain injury
3	and dementia;
4	(G)(F) models for forensic treatment, including inpatient treatment,
5	community based treatment, or other treatment models the size, scope, and
6	fiscal impact of any forensic treatment facility; and
7	(H)(G) any additional recommendations to address the gaps in the
8	current mental health and criminal justice system structures and opportunities
9	to improve public safety and address the treatment needs for individuals
10	incompetent to stand trial or who are adjudicated not guilty by reason of
11	<u>insanity</u> .
12	(2) Based on the recommendations in the preliminary report submitted
13	to the General Assembly pursuant to subdivision (1) of this subsection, On or
14	before January 15, 2022, the Department shall submit a second preliminary
15	report to the House Committees on Corrections and Institutions, on Health
16	Care, and on Judiciary and to the Senate Committees on Health and Welfare
17	and on Judiciary on or before April 15, 2022 as to whether or not a forensic
18	treatment facility is needed in Vermont summarizing the work completed
19	pursuant to subdivision (1) of this subsection to date.
20	(3) On or before September 15, 2022, the Department shall submit a
21	final report to the Joint Legislative Justice Oversight Committee that refines

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1	and finalizes the recommendations made pursuant to subdivisions (1) and (2)
2	of this subsection, including addressing the size, scope, and fiscal impact of
3	any forensic treatment facility if one is recommended in subdivision (2).
4	(c) On or before February 1, 2022, the Department of Mental Health shall
5	submit a report to the House Committees on Corrections and Institutions, on
6	Health Care, and on Judiciary and to the Senate Committees on Health and
7	Welfare and on Judiciary that assesses the necessity of notification to the
8	prosecutor upon becoming aware that individuals on orders of
9	nonhospitalization pursuant to 18 V.S.A. § 7618 are not complying with the
10	order or that the alternative treatment is not adequate to meet the individual's
11	treatment needs, including any recommendations:
12	(1) necessary to clarify the process;
13	(2) addressing what facts and circumstances should trigger the
14	Commissioner's duty to notify the prosecutor; and
15	(3) addressing steps that the prosecutor should take after receiving the
16	notification.
17	(d) On or before January 15, 2023, the Department of Mental Health shall
18	submit a report to the House Committees on Corrections and Institutions, on
19	Health Care, and on Judiciary and to the Senate Committees on Health and
20	Welfare and on Judiciary comparing competency restoration models and
21	addressing how cases where competency is not restored are addressed.

1	(e)(1) In conducting the work required by this section, including
2	evaluations for forensic treatment facility models pursuant to subdivision
3	(b)(2) subsection (b) of this section, the working group shall ensure:
4	(A) that social and racial equity issues are considered, including
5	issues related to transgender and gender nonconforming persons; and
6	(B) consistency with the General Assembly's policy in 18 V.S.A.
7	§ 7629(c) of working "toward a mental health system that does not require
8	coercion or the use of involuntary medication."
9	(2) These considerations shall be reflected in the final report submitted
10	pursuant to subdivision (b)(1) of this section and the reports submitted
11	pursuant to subsections (c) and (d) of this section.
12	(f) The Department shall access regional or national expertise to present
13	models to the working group for review, including any model recommended
14	by members of the working group.
15	(g) The final report submitted pursuant to subdivision (b)(1) of this section
16	and the reports submitted pursuant to subsections (c) and (d) of this section
17	shall include proposed draft legislation addressing any identified needed
18	changes to statute.
19	(h) Members of the working group who are neither State employees nor
20	otherwise paid to participate in the working group in their professional

- 1 capacity shall be entitled to per diem compensation and reimbursement of
- 2 expenses for attending meetings as permitted under 32 V.S.A. § 1010.
- 3 <u>Second</u>: By striking out Sec. 7, creation of committee, in its entirety and
- 4 inserting in lieu thereof:
- 5 [Deleted.]